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TPE	_	PART B	- FEE(S)	TRAI	NSMITTAL)t	γτας	proble	
NA O D X			or <u>F</u>	<u>ax</u>	Mail Stop ISSUE Commissioner for P.O. Box 1450 Alexandria, Virgi (703) 746-4000	r Patents inia 22313-1450			
THE PROPERTY OF THE PROPERTY OF			E FEE and F ders and notif specifying a	PUBLIC fication new co	ATION FEE (if required from the following from the feet was prespondence address;	red). Blocks 1 through 5 s ill be mailed to the current and/or (b) indicating a sep	hould be correspond arate "FEE	ompleted where lence address as ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 23569 7590 02/08/2005 SQUARE D COMPANY INTELLECTUAL PROPERTY DEPARTMENT 1415 SOUTH ROSELLE ROAD PALATINE, IL 60067					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.				
					Darlene Rentschler (Depositor's name)				
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					- March	1 June			
					5 May	05		(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN			TOR	ATTORNEY DOCKET NO.	CONFIR	MATION NO.	
10/045,517	10/26/2001	William A. White I			11	SAA-74	-	3461	
TITLE OF INVENTION: TI	RIGGERED COMMUNICA	TION NETWORK	FOR CANO	PEN NI	ETWORKS				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE PU			BLICATION FEE	TOTAL FEE(S) DUE	DA	TE DUE	
nonprovisional	NO	\$1400			\$300	\$1700	05/	09/2005	
EXAMINER ART U			NIT CLASS-SUBCLASS						
KIM, HAROLD J			32 710-036000						
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T			-				
	an assignee is identified be 37 CFR 3.11. Completion					ee is identified below, the	document ha	as been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Schneider Automation, Inc. North Andover, MA									
Please check the appropriate 4a. The following fee(s) are	assignee category or categor				Individual 🔀 Co	rporation or other private gr	oup entity	Government	
Issue Fee	enciosed.		Payment of I	٠,		11			
				☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.					
							aradit anu	overnovment to	
			Deposit Acco	ount Nur	nber 19.387	arge the required fee(s), or	copy of this	form).	
a. Applicant claims SI	(from status indicated above MALL ENTITY status. See 2	37 CFR 1.27.	b. Applica	ant is no	longer claiming SMAL	L ENTITY status. See 37 C	FR 1.27(g)((2).	
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issu ublication Fee (if required) words of the United States Pate	e Fee and Publicat vill not be accepted not and Trademark	ion Fee (if and from anyone Office.	y) or to other th	re-apply any previously an the applicant; a regis	paid issue fee to the applic stered attorney or agent; or t	ation identif he assignee	ied above. or other party in	
Authorized Signature	Kolut TX	w			Date	5/5/05			
Typed or printed name Robert Toczycki					Registration l	r			
This collection of information an application. Confidentialing the completed an	n is required by 37 CFR 1.3 ty is governed by 35 U.S.C.	11. The information 122 and 37 CFR 1	is required to	o obtain	or retain a benefit by the estimated to take 12 n	e public which is to file (an ninutes to complete, includi	d by the US	PTO to process)	

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